

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
4	/					
5	/					
6	/					
7	/					
8	/					
9	/					
10	/					
11	/					
12	/					
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48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	18					
TOTAL CLAIMS	20					

	*	*	*	*
	IND.	DEP.	IND.	DEP.
51				
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100				
TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS